



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

FEB 12 1997

Gary Paul, Treasurer
Democratic State Central Committee
of California-Federal
911 20th Street, Suite 100
Sacramento, CA 95814

Identification Number: C00105668

Reference: 30 Day Post-General Report (10/17/96-11/25/96)

Dear Mr. Paul:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-The beginning cash balance of this report should equal the ending balance of your 12 Day Pre-General Report. Please clarify this discrepancy and amend any subsequent report(s) that may be affected by this correction.

-Your report discloses receipts totalling \$16,344.00 and \$109,638.42 from the Birthday Victory Fund and the Democratic State Party Victory Fund, which are joint fundraising committees affiliated with your committee. Please be advised that a memo Schedule A must be provided to itemize your committee's share of the gross contributions received through the joint fundraisers. The memo schedule should itemize each individual who has contributed an aggregate in excess of \$200 during the calendar year, and provide the amount of unitemized contributions received. In addition, the memo schedule should itemize your committee's share of all contributions from political committees, regardless of amount. 11 CFR §102.17(c)(8)(i)(B)

-Your report discloses a payment(s) on Schedule B to Wells Fargo Bank that has not been recorded on Schedule C. Loan payments must also be reflected on Schedule C. Please amend your report to clarify this discrepancy. 2 U.S.C. §434(b)(4)

DEMOCRATIC STATE CENTRAL COMMITTEE OF
CALIFORNIA-FEDERAL
PAGE 2

-Schedule D discloses \$1,146.72, \$615.75 and \$351.22 in payment(s) this period to Fairbank, Maslin, Maullin Assoc., Humboldt County Democratic Committee, and McKesson Water Products Co.; however, there are \$0 in payments reflected on your disbursement schedules. Please amend your report to clarify this discrepancy.

-The totals listed on Lines 7, 11(a)(i), 11(a)(ii), 11(a)(iii), 11(c), 11(d), 12, 17, 19, 20, 21(a)(i), 21(a)(ii), 21(c), 30 and 31, Column B of the Summary and Detailed Summary Pages appear to be incorrect. Please be advised that you should add the "Calendar Year-to-Date" total from your previous report to the current "Total This Period" figure from Column A to derive the correct Column B totals. Please amend your report and any subsequent reports that may be affected by this correction.

-Schedule A of your report (pertinent portion(s) attached) discloses a contribution(s) from an organization(s) which is not a political committee registered with the Commission. In order for your committee to accept contributions from unregistered organizations into accounts used to influence federal elections, your committee should take steps to insure that the contributor(s) used permissible funds to make the contribution(s) to avoid violating 2 U.S.C. §§441a(f) and 441b or 11 CFR §102.5(b). Under 11 CFR §102.5(b), organizations which are not political committees under the Act and choose to contribute to federal committees must either: 1) establish a separate account which contains only those funds permitted under the Act, or 2) demonstrate through a reasonable accounting method that the organization has received sufficient funds subject to the limitations and prohibitions in order to make the contribution.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with clarifying information. In addition, please clarify whether the contribution(s) received from the referenced organization(s) is permissible. To the extent that your committee has received impermissible funds, the Commission recommends that you transfer the impermissible funds to an account not used to influence federal elections or refund the impermissible amount(s) to the donor(s) in accordance with 11 CFR §103.3(b). In order to protect the donor's interests, the Commission recommends that you inform the contributor(s) in writing to provide the donor(s) with the option of receiving a refund or granting written authorization for a transfer to another account.

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of your check for the transfer-out or refund. Should you choose to transfer-out or refund the contribution(s), the

Commission will presume the funds were impermissible if no statement from your committee provides information to the contrary. Transfers-out and refunds should be disclosed on a Schedule B supporting Line 22 or 28 of the report covering the period during which the transaction was made.

Although the Commission may take further legal action concerning the acceptance of prohibited contributions, prompt action by your committee in transferring-out or refunding the amounts will be taken into consideration.

-Schedule A of your report (pertinent portion(s) attached) discloses a contribution(s) which appears to exceed the limits set forth in the Act. 2 U.S.C. §441a(f) and 11 CFR §110.1(d) preclude a committee from receiving contributions from another political committee or person in excess of \$5,000 per calendar year.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with the clarifying information. If the contribution(s) you received exceeded the limits, you must seek reattribution of the contribution pursuant to 11 CFR §110.1(k), transfer-out the amount in excess of \$5,000 to an account not used to influence federal elections or refund the excessive amount to the donor(s) in accordance with 11 CFR §103.3(b). In the best interest of your committee, all reattributions, transfers-out, and refunds should be made within sixty days of the treasurer's receipt of the contribution(s). In order to protect the donor's interests, the Commission recommends that you inform the contributor(s) in writing to provide the donor(s) with the option of granting written authorization for a reattribution or transfer-out to another account or receiving a refund.

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of your check for the transfer-out or refund. In addition, any reattributions should be reported as memo entries on Schedule A of the report covering the period during which the authorization for the reattribution is received. Any transfers-out or refunds should be disclosed on Schedule B supporting Line 22 or 28 of the report during which the transaction was made.

Although the Commission may take further legal action regarding the acceptance of an excessive contribution(s), prompt action by your committee to seek reattribution, transfer-out or refund the excessive amount will be taken into consideration.

-You must make an attempt to obtain the full name, mailing address, occupation and name of employer for all individuals who contribute more than \$200 in a calendar year. Please amend your report to include the omitted information.

A committee may demonstrate "best efforts" to obtain the required information by providing the Commission with a description of its procedures for requesting the information and may also supply a copy of a solicitation: the committee must request the contributor information in initial solicitations; make follow-up requests (if necessary); report the information; and file amendments to disclose previously unreported information. Each solicitation must include a clear and conspicuous request for the information. If a committee receives a contribution that exceeds the \$200 threshold but lacks contributor information, the committee must, within 30 days, make an additional written or oral request for the information. Please note that a written request may not include an additional solicitation or material on any other subject, other than thanking the contributor for the donation and must include a pre-addressed return post card or envelope for the contributor's response. An oral request must be documented in writing. Committees must also disclose information that was not provided by the contributor, but is available in any of the committee's records for that current election cycle. Furthermore, if a committee receives contributor information after the contributions have been reported, it must submit, with its next report, an amended memo Schedule A listing all the contributions for which additional information was received or file, on or before the next reporting date, amendments to the previous reports on which the contributions were originally disclosed. See 11 CFR §104.3(a)(4)(i) and 11 CFR §104.7.

-Schedule A supporting Line 12 discloses a transfer-in from the Democratic Congressional Campaign Committee and the Democratic National Committee. Schedule B supporting Line 21(b) reflects payments for exempt activity. Payments for this type of activity are exempt from the definition of a contribution or expenditure if certain conditions are met. The conditions are that no public advertising may be used including distribution by direct mail; all funds used for the activity must be permitted under the Act; none of the funds used may have been designated for a particular candidate; and finally, payments for the activity may not be made from transfers-in from the national committee to specifically fund the activity. For further guidance, please refer to 11 CFR §§100.7(b)(15) and (17) and to the Campaign Guide for Party Committees.

Please clarify the nature of the transfers-in and subsequent payments for the exempt activity. If the activity disclosed on your report does not meet the definition of "exempt" activity as described above and if any portion of the expenditures were made on behalf of specifically identified candidates, that amount must be disclosed on Schedule B or F supporting Line 23 or 25 of the Detailed Summary Page as appropriate.

-The coordinated expenditure schedule (Schedule F) should disclose the following information: identification of the authorizing committee, the payee's name and address, the purpose of the expenditure as well as identification of the candidate supported, the date and amount of the payment and the aggregate year-to-date total for each candidate supported. Please amend Schedule F by providing the aggregate year-to-date total for each candidate. 2 U.S.C. §441a(d)

-On Schedule H2, you have disclosed allocation percentage ratios for Finance Council Summit which do not equal 100% when added together. Please amend your report to correct this discrepancy. 11 CFR §104.10(a)(1)

-On Schedule H3 supporting Line 18 of the Detailed Summary Page, you have not provided the unique code for the transfer made on 11/13/96 for exempt activity/direct candidate support. Please amend your report to correctly identify this event(s). 11 CFR §104.10

-Itemized disbursements must include a brief statement or description of why the disbursements were made. Please amend Schedule H4 of your report to clarify the following description(s): Voter registration. For further guidance regarding acceptable purposes of disbursements, please refer to 11 CFR §104.3(b)(3).

-Schedule H2 of your report indicates that your committee participated in Gore Reception fundraising activities or events during the reporting period. However, there are no corresponding disbursements reflected on your Schedule H4. If any disbursements were incorrectly reported, you should file an amended Schedule H4 with the correct unique identifying code or title.

Note that you need not include activities on Schedule H2 if there are no corresponding payments made for the activity during the reporting period.

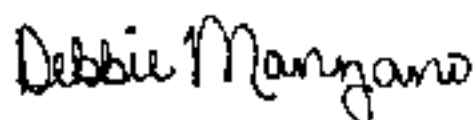
-Schedule D of your report has failed to include certain information. Commission Regulations require the full name and mailing address of each

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creditor, the outstanding balance at the beginning and end of the reporting period, the amount incurred during the period, the payment made during the period, and the nature or purpose of each debt. Additionally, all debts must be reported continuously until extinguished or settled. Please amend your report by providing the purpose of the debt owed to Financial Innovations.
11 CFR §104.11

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 219-3580.

Sincerely,



Debbie Manzano
Senior Reports Analyst
Reports Analysis Division

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 4 for
Line Number (11c)

Any info. copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in full)

Democratic State Central Comm. of CA-Federal COO105668

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
NFT Staff Union Committee on Political Action 555 New Jersey Avenue, N.W. Washington, DC 20001	Occupation	10/31/96	1500.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$	1500.00

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
American Federation of Teachers 555 New Jersey Ave., N. W. Washington, DC 20001	Occupation	10/31/96	5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$	5000.00

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
Association of Trial Lawyers of America PAC 1850 - 31st St., N.W. Washington, DC 20007	Occupation	10/28/96	5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$	5000.00

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
OMA COPY FEE 501 - 1st St., SW Washington, DC 20001	Occupation	10/25/96	5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$	5000.00

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
Cabazon Band of Mission Indians 14-2nd India Springs Drive Indio, CA 92201	Occupation	10/18/96	1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$	1000.00

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
Walter Capps for Congress PO Box #1429 Santa Barbara, CA 93100-1429	Occupation	11/21/96	5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$	5000.00

SUBTOTAL of Receipts This Page (optional)..... 22500.00

TOTAL This period (last page this line number only).....

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in full)
Democratic State Central Comm. of CA-Federal C00105668

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
Friends of Jane Hansen 8845 Wilshire Boulevard, Suite 20 Beverly Hills, CA 90211	Occupation	10/21/96	5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$	5000.00

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
Hotel Employees and Restaurant Employees FACW00000415- 1219 13th Street, NW Washington, DC 20007	Occupation	10/22/96	1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$	1000.00

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
I.N.E.W.-C.O.P.E. 1125 - 15th Street, N.W. Washington, DC 20005	Occupation	11/01/96	5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$	5000.00

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
Laborers' Political League 905 Sixteenth Street, N.W. Washington, DC 20005	Occupation	11/05/96	5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$	5000.00

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
Missouri Wip '96 8520 Manchester Road St. Louis, MO 63135	Occupation	12/05/96	5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$	5000.00

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
San Manuel Tribal Administration 76524 Indian Road Highland, CA 92346	Occupation	10/23/96	5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$	5000.00

SUBTOTAL of Receipts This Page (optional)..... 25000.00
TOTAL This period (last page this line number only).....

SCHEDULE A

ITEMIZED RECEIPTS

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Line Number (11c)

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Name of Committee (in Full)

Democratic State Central Comm. of CA-Federal COO105668

Full Name, Mailing Address and ZIP Code Seneca Trust Fund of Mission Indians PO Box 517 Seneca Trust, CA 93460	Name of Employer Occupation	Date (month, day, year) 10/21/96	Amount of Each Receipt this period 5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date \$		5000.00	
Full Name, Mailing Address and ZIP Code Ellen Tauscher For Congress 555 Capitol Mall, Suite 1425 Sacramento, CA 95814	Name of Employer Occupation	Date (month, day, year) 10/21/96	Amount of Each Receipt this period 5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date \$		5000.00	
Full Name, Mailing Address and ZIP Code United Food Commercial Workers Intl Union PAC 1775 K Street, NW Washington, DC 20006	Name of Employer Occupation	Date (month, day, year) 11/01/96	Amount of Each Receipt this period 5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date \$		5000.00	
Full Name, Mailing Address and ZIP Code United Pilots Political Action Committee 1400 Shafer Court, Suite 700 Rosemont, IL 60018-6910	Name of Employer Occupation	Date (month, day, year) 10/21/96	Amount of Each Receipt this period 5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date \$		5000.00	
Full Name, Mailing Address and ZIP Code Victory USA 555 Capitol Mall, Suite 1425 Sacramento, CA 95814	Name of Employer Occupation	Date (month, day, year) 11/05/96	Amount of Each Receipt this period 5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date \$		5000.00	

SUBTOTAL of Receipts This Page (optional) 25000.00
TOTAL This period (last page this line number only) 101000.00

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 3 for
Line Number (12)

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Name of Committee (in Full)

Democratic State Central Comm. of CA-Federal COO105668

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
Democratic National Committee 410 South Capitol Street, S.E. Washington, DC 20003	Occupation	10/30/96	8138.00

Receipt for: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date \$ 2407437.35

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
Democratic National Committee 410 South Capitol Street, S.E. Washington, DC 20003	Occupation	10/31/96	71375.00

Receipt for: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date \$ 3407437.35

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
Democratic National Committee 410 South Capitol Street, S.E. Washington, DC 20003	Occupation	10/10/96	25946.00

Receipt for: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date \$ 3407437.35

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
Democratic National Committee 410 South Capitol Street, S.E. Washington, DC 20003	Occupation	10/11/96	18986.00

Receipt for: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date \$ 3407437.35

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
Tom Lantos for Congress Committee P.O. Box 611 Burlingame, CA 94021	Occupation	10/11/96	25000.00

Receipt for: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date \$ 100300.00

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
Missouri State Democratic Committee PO Box 713 Jefferson City, MO 64102	Occupation	10/24/96	10000.00

Receipt for: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date \$ 10000.00

SUBTOTAL of Receipts This Page (optional)..... 187014.00

TOTAL This period (last page this line number only)..... 595537.11

